	No. 1034—RAM scribed by General, U. S. per 7, 1950 51, Supp. No. 11) bruary 20, 1952)	oet Paimbuseehlo	S OTHER THAN								
(Department, bureau, or establishment)								PAID BY			
oucher prep	ared at	(	Give place and date)				-				
THE UNITED STATES, Dr., Payee's Account No. 900					SAPC 53 (B)						
<i>To</i>							COPY OF S				
0	************	(Payer	e)				- /			_	
	(Ad	dress)	(City)	(Sta	te)					<u> </u>	
No. and Date of Order	Date of Delivery or Service	(Enter description, item	CLES OR SERVICES number of contract or I r information deemed n	Federal sup ecessary)	ply	QUANTITY	UNIT	PRICE	AMOUN Dollars	Ct	
,		Diacount 1811114	<del></del>		-		<del></del>			-	
		Costs					·		57,760	7	
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'AYMENT:											
Complete						,					
Partial Final		T1	nation sheet(s) if necessar								
hipped from	<u> </u>	to Weig		rnment B/		·	<u> </u>	Total	57,760	7	
certify that the	above bill is correc	t and just and that payment	has not been received.	١.		e must NO					
STAT	INITI	(Sign original only)			Difterenc	es				-	
	11 N 1 1/2 /2			<del></del>							
Date				<u> </u>	Amou	nt verified;	correct fo		57.760	1	
		<b></b>			(Signa	ture or init	ials)	114	· · · · ·		
Contract No. Al		Date	Req. No.		D	ate	I	nvoice Rec'			
Pursuant to autho	rity vested in me,	I certify that this account is c	orrect and proper for pay	yment.				1/2	STATI	IIN I	
i l		(V)	sign	† <u>-</u>		.,,		Officer)			
3		Zr	A ODICINAL .	Title		<u> </u>					
Title	ACTING OFF	STATIN	TI .	Date							
	THE REVERSE OF T	HIS FORM MUST BE EXECUTED WHEN	PURCHASES ARE MADE OR SE	RVICES SECUR	ED WITHO	UT WRITTEN	AGREEMENT	IN ANY FORM	I		
STATINTI	ACCOU	NTING CLASSIFICATION (A	Appropriation Symbol m	ust be show	vn; othe	r classifica	tion optio	nal)			
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• • • •		<b>V</b> .									
	<del></del>	11							the United Sta	tes in	
Check 1	No	dated							amed above.		